

CLAIMS ONLY						Application Number <u>10811086</u>	Filing Date					
						Applicant(s)						
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	1						51					
2		1					52					
3		1					53					
4		1					54					
5		1					55					
6		1					56					
7		1					57					
8		1					58					
9		1					59					
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12		1					62					
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15		1					65					
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17		1					67					
18		1					68					
19	1						69					
20	1						70					
21	1						71					
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23							73					
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39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	3						Total Indep					
Total Depend	19						Total Depend					
Total Claims	22						Total Claims					